2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 19, 2009
Secretary of State

DOCUMENT# N08000000109

Entity Name: DEVCHIX INC

Current Principal Place of Business:

525 3RD STREET NORTH
APT 504
JACKSONVILLE BEACH, FL 32250

New Principal Place of Business:

320 1ST STREET NORTH
SUITE 713
JACKSONVILLE BEACH, FL 32250

Current Mailing Address:

525 3RD STREET NORTH
APT 504
JACKSONVILLE BEACH, FL 32250

New Mailing Address:

320 1ST STREET NORTH
SUITE 713
JACKSONVILLE BEACH, FL 32250

FEI Number: 26-1664910 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MCADAM, DESI J
525 3RD STREET NORTH
APT 504
JACKSONVILLE BEACH, FL 32250 US

Name and Address of New Registered Agent:

MCADAM, DESI J
320 1ST STREET NORTH
SUITE 713
JACKSONVILLE BEACH, FL 32250 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____ 01/19/2009
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: MCADAM, DESI J
Address: 525 3RD STREET NORTH #504
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: VP ( ) Delete
Name: STOWE, NOLA
Address: 317 S. DEARBORN AVE.
City-St-Zip: BRADLEY, IL 60915

Title: TR ( ) Delete
Name: PHELAN, MARIAN
Address: 40 CAT ROAD
City-St-Zip: PONTE VEDRA BEACH, FL 32082

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DESI MCADAM P 01/19/2009
Electronic Signature of Signing Officer or Director — Date